PE. 40		PART	B - FEE(S) TRAI	NSMITTAL -	7	
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appropriate All further indicated inless corrected maintenance fee notification	below or directed oth	for transmitting the ISS ing the Patent, advance in Block 1, by	SUE FEE and PUBLIC orders and notification (a) specifying a new or	ATION FEE (if required of maintenance fees or correspondence address	uired). Blocks 1 through 5 will be mailed to the curre ; and/or (b) indicating a s	should be completed where ent correspondence address as eparate "FEE ADDRESS" for
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VOLPE AND K DEPT. ATI UNITED PLAZA	OENIG, P.C. SUITE 1600	/2006		Cer I hereby certify that the States Postal Service vaddressed to the Mai	e of mailing or transmission rtificate of Mailing or Tra his Fee(s) Transmittal is be with sufficient postage for il Stop ISSUE FEE addre TO (571) 273-2885, on the	insmission ing deposited with the United first class mail in an envelope as above, or being facsimile
30 SOUTH 17TH PHILADELPHIA				C. Freder	ick Koenig I	(Depositor's name)
I HILADELI HIA	, FA 19103			13		(Signature)
			-	January 2	2007	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/704,329	11/02/2000		David I.J. Glen	· · · · · ·	ATI-000153BT	4939
TITLE OF INVENTION:	write once syste	M AND METHOD FO	R FACILITATING DIC	SITAL ENCRYPTED	TRANSMISSIONS	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	E FEE TOTAL FEE(S) DO	JE DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	01/03/2007
EXAMINER ART UNIT		CLASS-SUBCLASS				
ARANI, TAGHI T 2131			713-189000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	D RESIDENCE DATA	TO BE PRINTED ON		.	· · · · ·	
PLEASE NOTE: Unles recordation as set forth i (A) NAME OF ASSIGN	s an assignee is identi n 37 CFR 3.11. Comp IEE	fied below, no assignee letion of this form is NC	data will appear on the data w	c patent. If an assign	COUNTRY)	document has been filed for
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4a. The following fee(s) are submitted: 4b. Payment I ssue Fee				•••	ny previously paid issue fe	e shown above)
☐ Publication Fee (No: ☐ Advance Order - # o		ermitted)	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0441 (enclose an extra copy of this form).			
5. Change in Entity Status	*	•	_		LL ENTITY status. See 37	
						the assignee or other party in
Authorized Signature					ary 2, 2007	
Typed or printed name	C. Frederí	ck Koenig 1	111	Registration N	o. 29,662	
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